

BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP
AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
A. AFFILIATE NAME		
		BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.
1	Affiliate Description	BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC. IS THE SOLE MEMBER OF BRIDGEPORT HOSPITAL. IT WAS ESTABLISHED AS A NOT FOR PROFIT, NONSTOCK, CONNECTICUT CORPORATION TO PROMOTE AND CARRY OUT CHARITABLE AND EDUCATIONAL ACTIVITIES.
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	267 Grand Street, P.O.BOX 1234
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	William Jennings
9	CEO Title	PRESIDENT & CEO
10	CT Agent Name	Dr. Michael Ivy
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 GRANT STREET , PO BOX 5000
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -
B. AFFILIATE NAME		
		BRIDGEPORT HOSPITAL FOUNDATION, INC.
1	Affiliate Description	THE FOUNDATION WAS FORMED TO SOLICIT CONTRIBUTIONS FOR THE BENEFIT OF BRIDGEPORT HOSPITAL AND HEALTHCARE SERVICES, INC. THIS ENTITY IS A NOT FOR PROFIT, NON STOCK CONNECTICUT CORPORATION.
2	Affiliate type of service	Fund Raising/Management
3	Tax Status	Not for Profit
4	Street Address	267 GRANT STREET PO BOX 5000
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	Steve Jakab
9	CEO Title	President
10	CT Agent Name	Jennifer Wilcox
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 Grant Street
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -
C. AFFILIATE NAME		
		BRIDGEPORT RENEWAL, LLC
1	Affiliate Description	Bridgeport Renewal, LLC is a 100% controlled ownership of SCHS Properties, Inc. Its purpose is holding titles to property and collecting income. It is not tax exempt and all of it's income/loss passes straight through to SCHS Properties.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	267 Grant Street
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	Hope Juckel-Regan
9	CEO Title	President
10	CT Agent Name	Jennifer Wilcox
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 Grant Street
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -

BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP
AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
	D. AFFILIATE NAME	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)
1	Affiliate Description	CENTURY OPERATES AN AGENCY SPECIALIZING IN HEALTHCARE PATIENT RECEIVABLE COLLECTIONS IN WHICH BRIDGEPORT HOSPITAL OWN A 47.6%
2	Affiliate type of service	Collection Agency
3	Tax Status	For Profit
4	Street Address	23 Maiden Lane
5	Town	North Haven
6	State	Connecticut
7	Zip Code	06473 -
8	CEO Name	John Skelly
9	CEO Title	Chairman of the Board
10	CT Agent Name	Steve Markesich
11	CT Agent Company	Century Financial Services, Inc.
12	CT Agent Company Street Address	23 Maiden Lane
13	CT Agent Town	North Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06473 -
	E. AFFILIATE NAME	SCHS PROPERTIES, INC.
1	Affiliate Description	THIS ENTITY IS A NOT FOR PROFIT, NON STOCK, CONNECTICUT CORPORATION CREATED FOR THE PURPOSE OF HOLDING TITLE TO PROPERTY, COLLECTING INCOME THEREFROM AND TURNING OVER THE ENTIRE AMOUNT THEREOF, LESS EXPENSES TO BHHS, INC.
2	Affiliate type of service	Other HealthCare Svcs(Specify)
3	Tax Status	Not for Profit
4	Street Address	267 GRANT STREET PO BOX 5000
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	William Jennings
9	CEO Title	CEO
10	CT Agent Name	Jennifer Wilcox
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 Grant Street
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -
	F. AFFILIATE NAME	SOUTHERN CONNECTICUT HEALTH NETWORK, INC.
1	Affiliate Description	FOR FULL DISCLOSURE PURPOSES, NOT AN AFILIATE. SCHN IS A PHYSICIAN HOSPITAL ORGANIZATION (PHO), DESIGNED TO COORDINATE MANAGED CARE CONTRACTS FOR BRIDGEPORT HOSPITAL AND ITS PHYSICIANS.
2	Affiliate type of service	Physicians Hospital Org. (PHO)
3	Tax Status	For Profit
4	Street Address	267 Grant Street
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	BRUCE WAINER, M.D.
9	CEO Title	PRESIDENT & CHAIRMAN
10	CT Agent Name	Dr. Michael Ivy
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	267 Grant Street, Floor 11
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -

BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 20 - REPORT OF EACH JOINT VENTURE, PARTNERSHIP
AND CORPORATION RELATED TO THE HOSPITAL

(1)	(2)	(3)
LINE	DESCRIPTION	AFFILIATE INFORMATION
G.	AFFILIATE NAME	SOUTHERN CONNECTICUT PHYSICIANS, P.C.
1	Affiliate Description	FOR FULL DISCLOSURE PURPOSES ONLY. NOT AN AFFILIATE. THIS ENTITY IS A PHYSICIAN ORGANIZATION ESTABLISHED TO COORDIANTE THE MANAGED CARE CONTRACTING ACTIVITIES OF BRIDGEPORT HOSPITALS PHYSICIANS.
2	Affiliate type of service	Physicians Hospital Org. (PHO)
3	Tax Status	For Profit
4	Street Address	226 MILL HILL AVENUE
5	Town	Bridgeport
6	State	Connecticut
7	Zip Code	06610 -
8	CEO Name	BRUCE WAINER, M.D.
9	CEO Title	PRESIDENT
10	CT Agent Name	Dr. Michael Ivy
11	CT Agent Company	Bridgeport Hospital
12	CT Agent Company Street Address	300 Mill Hill Avenue
13	CT Agent Town	Bridgeport
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06610 -
H.	AFFILIATE NAME	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)
1	Affiliate Description	YALE NEW HAVEN HEALTH SERVICES CORPORATION IS THE SOLE MEMBER OF BHHS, GHCS AND YALE NEW HAVEN HOSPITAL. IT PROVIDES MANAGEMENT SERVICES TO ITS SUBSIDIARIES.
2	Affiliate type of service	Parent Corporation
3	Tax Status	Not for Profit
4	Street Address	789 Howard Avenue
5	Town	New Haven
6	State	Connecticut
7	Zip Code	06519 -
8	CEO Name	MARNA BORGSTROM
9	CEO Title	PRESIDENT & CEO
10	CT Agent Name	Rebecca A. Matthews Atty. Dir.
11	CT Agent Company	YNHHSC
12	CT Agent Company Street Address	60 Temple Street, 5th Floor, Suite 5B
13	CT Agent Town	New Haven
14	CT Agent State	Connecticut
15	CT Agent Zip Code	06510 -

* P.O. BOX IS UNACCEPTABLE WITHOUT A STREET ADDRESS FOR EACH AGENT COMPANY

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2011
A. BRIDGEPORT HOSPITAL			
1		Unrestricted	\$74,736,000
2		Temporarily Restricted by Donor	\$24,997,000
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$19,081,000
5		Intercompany Eliminations	\$0
		Total:	\$118,814,000
B. BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.			
1		Unrestricted	(\$3,722,000)
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	(\$3,722,000)
C. BRIDGEPORT HOSPITAL FOUNDATION, INC.			
1		Unrestricted	\$25,194,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$9,711,000
4		Permanently Restricted by Donor	\$13,683,000
5		Intercompany Eliminations	(\$48,588,000)
		Total:	\$0
D. BRIDGEPORT RENEWAL, LLC			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
E. CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
F. SCHS PROPERTIES, INC.			
1		Unrestricted	\$1,050,000
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$1,050,000
G. SOUTHERN CONNECTICUT HEALTH NETWORK, INC.			
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 5 - HOSPITAL, AFFILIATE AND RELATED CORPORATION NET ASSETS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME	FUND DESCRIPTION / FUND PURPOSE	BALANCE AS OF 9/30/2011
H.	SOUTHERN CONNECTICUT PHYSICIANS, P.C.		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
I.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		
1		Unrestricted	\$0
2		Temporarily Restricted by Donor	\$0
3		Temporarily Restricted by Board	\$0
4		Permanently Restricted by Donor	\$0
5		Intercompany Eliminations	\$0
		Total:	\$0
	Total of all Affiliates (before Intercompany Eliminations)	Fund Balance:	\$164,730,000
	Intercompany Eliminations		(\$48,588,000)
	Total of all Affiliates	Fund Balance:	\$116,142,000

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011**

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
A.	BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$0
1		Equity transfer to Parent	09/30/2011	(\$7,861,140)
2		Management Fees from Parents	09/30/2011	(\$304,022)
3		Payments	09/30/2011	\$1,997,580
		Ending Unconsolidated Intercompany Balance:	9/30/2011	(\$6,167,582)
B.	BRIDGEPORT HOSPITAL FOUNDATION, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$325,289
1		Rental Reimb to Bridgeport Hospital	09/30/2011	\$4,200
2		Audit Fees Reimb to Bridgeport Hospital	09/30/2011	\$37,340
3		Management Fees to Bridgeport Hospital	09/30/2011	\$274,332
4		Insurance expense reimbursed to Bridgeport Hospital	09/30/2011	\$15,420
5		Salary and Benefits reimb to Bridgeport Hospital	09/30/2011	\$1,027,932
6		Services provided by hospital	09/30/2011	\$74,836
7		cash	09/30/2011	(\$1,406,278)
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$353,071
C.	BRIDGEPORT RENEWAL, LLC			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$0
D.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$0
		Nothing to Report		\$0
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$0
E.	SCHS PROPERTIES, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$98,745
1		Rent	09/30/2011	(\$206,264)
2		Reimbursements/Fund Transfers	09/30/2011	\$115,703
3		Management Fees	09/30/2011	\$15,024
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$23,208
F.	SOUTHERN CONNECTICUT HEALTH NETWORK, INC.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$8,187

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011**

REPORT 6 - TRANSACTIONS BETWEEN THE HOSPITAL AND AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)
LINE	AFFILIATE NAME	DESCRIPTION OF TRANSFER	DATE	TRANSFER TO / FROM HOSPITAL
1		Salary & Benefits	09/30/2011	\$14,761
2		Audit fees	09/30/2011	\$733
3		Rental reimbursed to Bridgeport Hospital	09/30/2011	\$6,501
4		Insurance expense reimbursed to Bridgeport Hospital	09/30/2011	\$4,296
5		cash	09/30/2011	(\$31,291)
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$3,187
G.	SOUTHERN CONNECTICUT PHYSICIANS, P.C.			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	\$6,273
1		Non Salary Expense	09/30/2011	\$4,296
2		Accounting Fees	09/30/2011	\$662
3		cash	09/30/2011	(\$9,987)
		Ending Unconsolidated Intercompany Balance:	9/30/2011	\$1,244
H.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)			
		Beginning Unconsolidated Intercompany Balance:	9/30/2010	(\$5,525,372)
1		Management and Business support	09/30/2011	(\$22,627,602)
2		MIS and Software	09/30/2011	(\$3,465,791)
3		Malpractice and Insurance	09/30/2011	(\$5,830,000)
4		Material Management	09/30/2011	(\$848,531)
5		Financial Planning, Budget	09/30/2011	(\$691,477)
6		Internal Audit and Compliance	09/30/2011	(\$2,459,552)
7		Call Center	09/30/2011	(\$257,089)
8		Cash Payments	09/30/2011	\$34,558,595
9		Clinical Information Services (EPIC)	09/30/2011	(\$9,771,591)
10		PAYMENTS/TRANSFERS (EPIC)	09/30/2011	\$6,914,760
		Ending Unconsolidated Intercompany Balance:	9/30/2011	(\$10,003,650)
			Grand Total:	(\$15,790,522)

BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 6A - TRANSACTIONS BETWEEN HOSPITAL AFFILIATES OR RELATED CORPORATIONS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	AFFILIATE TRANSFERRING FUNDS	AFFILIATE RECEIVING FUNDS	DESCRIPTION OF TRANSFER	DATE	AMOUNT
			Beginning Unconsolidated Intercompany Balance	10/01/2010	\$2,145,871
A.	BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.		Nothing to Report		\$0
			Total:	9/30/2011	\$0
B.	BRIDGEPORT HOSPITAL FOUNDATION, INC.		Nothing to Report		\$0
			Total:	9/30/2011	\$0
C.	BRIDGEPORT RENEWAL, LLC		Nothing to Report		\$0
			Total:	9/30/2011	\$0
D.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		Nothing to Report		\$0
			Total:	9/30/2011	\$0
E.	SCHS PROPERTIES, INC.		Nothing to Report		\$0
			Total:	9/30/2011	\$0
F.	SOUTHERN CONNECTICUT HEALTH NETWORK, INC.		Nothing to Report		\$0
			Total:	9/30/2011	\$0
G.	SOUTHERN CONNECTICUT PHYSICIANS, P.C.		Nothing to Report		\$0
			Total:	9/30/2011	\$0
H.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		Nothing to Report		\$0
			Total:	9/30/2011	\$0
			Ending Unconsolidated Intercompany Balance	9/30/2011	\$2,145,871

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 7- EXPENDITURES BY AFFILIATES / RELATED CORPORATIONS FOR THE BENEFIT OF THE HOSPITAL**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF EXPENDITURE	AMOUNT	DATE
	A. BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	B. BRIDGEPORT HOSPITAL FOUNDATION, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	C. BRIDGEPORT RENEWAL, LLC		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	D. CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	E. SCHS PROPERTIES, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	F. SOUTHERN CONNECTICUT HEALTH NETWORK, INC.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	G. SOUTHERN CONNECTICUT PHYSICIANS, P.C.		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	H. YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YHHSC)		
0	Nothing to Report	\$0	
	Total:	\$0	9/30/2011
	Grand Total:	\$0	9/30/2011

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 8 - HOSPITAL COMMITMENTS / ENDORSEMENTS FOR THE BENEFIT OF AFFILIATES / RELATED CORPORATIONS**

(1)	(2)	(3)	(4)
LINE	AFFILIATE NAME & DESCRIPTION OF THE COMMITMENT AND/OR ENDORSEMENT	AMOUNT	TERM IN YEARS
A.	BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
B.	BRIDGEPORT HOSPITAL FOUNDATION, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
C.	BRIDGEPORT RENEWAL, LLC		
0	Nothing to Report	\$0	0
	Total:	\$0	
D.	CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)		
0	Nothing to Report	\$0	0
	Total:	\$0	
E.	SCHS PROPERTIES, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
F.	SOUTHERN CONNECTICUT HEALTH NETWORK, INC.		
0	Nothing to Report	\$0	0
	Total:	\$0	
G.	SOUTHERN CONNECTICUT PHYSICIANS, P.C.		
0	Nothing to Report	\$0	0
	Total:	\$0	
H.	YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHHSC)		
0	Nothing to Report	\$0	0
	Total:	\$0	
	Grand Total:	\$0	

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR
INDIGENT CARE AND FREE BEDS**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Indigent Care					
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%
B. Free Beds					
	Beginning Balance	\$11,405,895.00	\$11,996,943.00	\$591,048.00	5%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$284,229.00	\$579,911.00	\$295,682.00	104%
3	Expenditures	\$162,485.00	\$557,685.00	\$395,200.00	243%
4	Unrealized Gains and Losses	\$469,304.00	\$144,148.00	(\$325,156.00)	-69%
	Ending Balance	\$11,996,943.00	\$12,163,317.00	\$166,374.00	1%
5	Projected Interest Income	\$600,000.00	\$600,000.00	\$0.00	0%
C. Other					
	Beginning Balance	\$0.00	\$0.00	\$0.00	0%
1	Donations	\$0.00	\$0.00	\$0.00	0%
2	Income	\$0.00	\$0.00	\$0.00	0%
3	Expenditures	\$0.00	\$0.00	\$0.00	0%
4	Unrealized Gains and Losses	\$0.00	\$0.00	\$0.00	0%
	Ending Balance	\$0.00	\$0.00	\$0.00	0%
5	Projected Interest Income	\$0.00	\$0.00	\$0.00	0%

BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 16 - DONATIONS AND FUNDS RESTRICTED FOR
INDIGENT CARE AND FREE BEDS

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

BRIDGEPORT HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2011		
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications for Hospital Bed Funds		185
2. A. Number of Patients receiving Hospital Bed Fund Grants		185
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F		\$557,685.36
1	Charles Ferry Fund	\$8,450.00
2	Charles Ferry Fund	\$7,806.71
3	Charles Ferry Fund	\$46,388.23
4	Charles Ferry Fund	\$5,927.42
5	Charles Ferry Fund	\$4,523.00
6	Charles Ferry Fund	\$11,600.00
7	Charles Ferry Fund	\$15,500.88
8	Charles Ferry Fund	\$1,104.00
9	Charles Ferry Fund	\$29,066.00
10	Charles Ferry Fund	\$114.00
11	Charles Ferry Fund	\$241.00
12	Charles Ferry Fund	\$1,492.00
13	Charles Ferry Fund	\$1,068.00
14	Charles Ferry Fund	\$304.00
15	Mary Nichols Ferry	\$5,788.01
16	Mary Nichols Ferry	\$1,293.28
17	Mary Nichols Ferry	\$287.28
18	Mary Nichols Ferry	\$9,261.45
19	Mary Nichols Ferry	\$30,619.14
20	Mary Nichols Ferry	\$4,550.00
21	Mary Nichols Ferry	\$241.00
22	Mary Nichols Ferry	\$1,848.00
23	Mary Nichols Ferry	\$914.00
24	Mary Nichols Ferry	\$241.00
25	Mary Nichols Ferry	\$1,357.00
26	Mary Nichols Ferry	\$235.00
27	Mary Nichols Ferry	\$810.00
28	Mary Nichols Ferry	\$706.00
29	Mary Nichols Ferry	\$41,107.06
30	Mary Nichols Ferry	\$34,762.54
31	Mary Nichols Ferry	\$21,032.70
32	Mary Nichols Ferry	\$11,992.00
33	Mary Nichols Ferry	\$3,527.00
34	Mary Nichols Ferry	\$1,256.01
35	Mary Nichols Ferry	\$2,363.44
36	Mary Nichols Ferry	\$3,199.00
37	Mary Nichols Ferry	\$3,111.00
38	Mary Nichols Ferry	\$2,517.00
39	Mary Nichols Ferry	\$9,622.48
40	Mary Nichols Ferry	\$5,150.52
41	Mary Nichols Ferry	\$4,208.00
42	Mary Nichols Ferry	\$2,098.68
43	Mary Nichols Ferry	\$15,414.58
44	Mary Nichols Ferry	\$19,491.66
45	Mary Nichols Ferry	\$12,793.74
46	Mary Nichols Ferry	\$12,769.65
47	Mary Nichols Ferry	\$4,201.72
48	Mary Nichols Ferry	\$2,452.70
49	Mary Nichols Ferry	\$3,133.00
50	Mary Nichols Ferry	\$3,088.00
51	Mary Nichols Ferry	\$2,701.60
52	Mary Nichols Ferry	\$1,853.00
53	Mary Nichols Ferry	\$1,018.32
54	Mary Nichols Ferry	\$1,861.35

BRIDGEPORT HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2011		
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for Hospital Bed Funds		185
2. A. Number of Patients receiving Hospital Bed Fund Grants		185
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F		\$557,685.36
55	Mary Nichols Ferry	\$1,603.00
56	Mary Nichols Ferry	\$2,024.00
57	Mary Nichols Ferry	\$1,096.51
58	Mary Nichols Ferry	\$667.00
59	Mary Nichols Ferry	\$652.00
60	Mary Nichols Ferry	\$758.25
61	Mary Nichols Ferry	\$1,061.60
62	Mary Nichols Ferry	\$1,015.00
63	Mary Nichols Ferry	\$1,005.00
64	Mary Nichols Ferry	\$1,002.00
65	Mary Nichols Ferry	\$2,562.00
66	Mary Nichols Ferry	\$2,542.00
67	Mary Nichols Ferry	\$2,537.24
68	Mary Nichols Ferry	\$2,531.43
69	Mary Nichols Ferry	\$3,030.98
70	Mary Nichols Ferry	\$2,529.00
71	Mary Nichols Ferry	\$2,466.00
72	Mary Nichols Ferry	\$2,277.12
79	Oliver Jennings	\$2,458.30
80	Oliver Jennings	\$2,216.00
81	Oliver Jennings	\$1,547.50
82	Oliver Jennings	\$1,584.14
84	Frederick A. Strong	\$165.18
85	Frederick A. Strong	\$1,138.57
86	Frederick A. Strong	\$60.67
87	Frederick A. Strong	\$1,087.00
88	Frederick A. Strong	\$1,169.30
89	Frederick A. Strong	\$1,138.82
90	Henry Cowd	\$2,624.00
91	Henry Cowd	\$2,875.10
92	Henry Cowd	\$195.00
93	Henry Cowd	\$800.00
94	William H. Brothwell	\$2,517.22
95	Edward W. and Ellen B. Harral	\$887.35
96	Edward W. and Ellen B. Harral	\$887.00
97	Edward W. and Ellen B. Harral	\$717.00
98	Edward W. and Ellen B. Harral	\$2,616.08
99	Edward W. and Ellen B. Harral	\$1,859.15
100	Edward W. and Ellen B. Harral	\$1,686.00
101	Catherine A. Pettingill	\$150.00
102	Archer Wheeler	\$2,202.00
103	Archer Wheeler	\$1,803.62
104	Archer Wheeler	\$2,795.14
105	Archer Wheeler	\$1,370.79
135	Archer Wheeler	\$1,491.00
136	Archer Wheeler	\$1,682.00
137	Archer Wheeler	\$832.45
138	Archer Wheeler	\$1,651.00
139	Archer Wheeler	\$1,132.00
140	Archer Wheeler	\$2,176.07
141	Archer Wheeler	\$2,111.02
142	Archer Wheeler	\$209.00
143	Archer Wheeler	\$1,161.00
144	Archer Wheeler	\$12,691.00

BRIDGEPORT HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2011		
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1. Number of Applications for Hospital Bed Funds		185
2. A. Number of Patients receiving Hospital Bed Fund Grants		185
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F		\$557,685.36
145	Charles Ferry Fund	\$50.00
146	Charles Ferry Fund	\$1,944.08
147	Charles Ferry Fund	\$1,261.06
148	Charles Ferry Fund	\$200.00
149	Charles Ferry Fund	\$1,544.14
150	Frederick Marquand	\$138.60
151	Frederick Marquand	\$232.99
152	Frederick Marquand	\$150.00
153	Frederick Marquand	\$2,100.00
154	Francis Wakemen	\$150.00
155	Francis Wakemen	\$125.00
156	Francis Wakemen	\$175.00
157	Francis Wakemen	\$275.00
158	Francis Wakemen	\$75.00
159	Francis Wakemen	\$1,466.05
160	Francis Wakemen	\$1,268.42
161	Francis Wakemen	\$919.20
162	Francis Wakemen	\$1,416.32
163	Francis Wakemen	\$435.38
164	Francis Wakemen	\$75.00
165	Alice Seltzer	\$491.34
166	Alice Seltzer	\$600.00
167	Alice Seltzer	\$100.00
168	Alice Seltzer	\$100.00
169	Alice Seltzer	\$168.04
170	Alice Seltzer	\$328.25
171	Anne Drew Miller	\$200.00
172	Anne Drew Miller	\$90.00
173	Anne Drew Miller	\$465.00
174	Anne Drew Miller	\$374.84
175	Anne Drew Miller	\$1,311.00
176	Anne Drew Miller	\$1,082.00
177	Anne Drew Miller	\$439.00
178	Anne Drew Miller	\$463.00
179	Anne Drew Miller	\$1,500.00
180	Anne Drew Miller	\$1,572.00
181	Anne Drew Miller	\$1,364.00
182	Anne Drew Miller	\$618.00
183	Anne Drew Miller	\$2,208.00
184	Anne Drew Miller	\$1,000.00
185	Anne Drew Miller	\$506.00
186	Anne Drew Miller	\$241.00
187	Anne Drew Miller	\$258.00
188	Anne Drew Miller	\$75.00
189	Anne Drew Miller	\$90.00
190	Anne Drew Miller	\$60.00
191	Anne Drew Miller	\$50.00
192	Anne Drew Miller	\$1,061.00
193	Anne Drew Miller	\$1,832.00
194	Anne Drew Miller	\$225.00
195	Anne Drew Miller	\$274.00
196	Anne Drew Miller	\$178.53
197	Anne Drew Miller	\$100.00
198	Anne Drew Miller	\$75.00

BRIDGEPORT HOSPITAL		
ANNUAL REPORTING		
FISCAL YEAR 2011		
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL		
A. Patient Activity		
(1)	(2)	(3)
Patient	Name of Hospital Bed Fund (FULL NAME)	Amount
1.Number of Applications for Hospital Bed Funds		185
2. A. Number of Patients receiving Hospital Bed Fund Grants		185
2. B. The Actual Total Dollar Amount provided to all patients from Hospital Bed F		\$557,685.36
199	Anne Drew Miller	\$100.00
200	Anne Drew Miller	\$224.00
201	Anne Drew Miller	\$258.00
202	Anne Drew Miller	\$258.00
203	Anne Drew Miller	\$258.00
204	Anne Drew Miller	\$1,240.00
205	Anne Drew Miller	\$500.00
206	Anne Drew Miller	\$910.00
207	Anne Drew Miller	\$385.37
208	Anne Drew Miller	\$500.00
209	Anne Drew Miller	\$190.00
210	Anne Drew Miller	\$209.00
211	Anne Drew Miller	\$96.00
212	Anne Drew Miller	\$58.00
213	Anne Drew Miller	\$325.00
214	Anne Drew Miller	\$1,871.00
215	Anne Drew Miller	\$424.00
216	Anne Drew Miller	\$276.00
217	Anne Drew Miller	\$458.00
218	Anne Drew Miller	\$258.00
219	Anne Drew Miller	\$258.00
220	Anne Drew Miller	\$429.00
221	Anne Drew Miller	\$1,188.00
Grand Total		\$557,685.36

BRIDGEPORT HOSPITAL					
ANNUAL REPORTING					
FISCAL YEAR 2011					
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
(3)	Fair Market Value of the Principal of each individual Hospital Bed Fund, or the Principal attributable to each				
(4)	Total Actual Earnings for each Hospital Bed Fund or the Earnings attributable to each Hospital Bed Fund.				
(5)	Actual Dollar Amount of Earnings reinvested as Principal, if any.				
(6)	Actual Dollar Amount of Earnings available for Patient Care.				
	McCord Fund	\$33,308.88	\$1,331.87	\$0.00	\$1,331.87
	Archer Wheeler Fund	\$1,068,855.41	\$77,698.97	\$0.00	\$77,698.97
	Florence Seeley Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Ruth Gilbert Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Lounsbury Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Helen Wordin Fund	\$399,357.83	\$15,968.53	\$0.00	\$15,968.53
	Hobart Wheeler Fund	\$183,372.76	\$8,773.21	\$0.00	\$8,773.21
	Mallett Fund	\$16,855.06	\$673.96	\$0.00	\$673.96
	Mrs. C.B.Seeley Fund	\$17,534.98	\$701.15	\$0.00	\$701.15
	Alice Setzer Fund	\$219,766.33	\$8,787.47	\$0.00	\$8,787.47
	Terry Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	E. Harral Fund	\$237,011.79	\$18,169.02	\$0.00	\$18,169.02
	Fannie Wording Fund	\$452,488.29	\$18,086.58	\$0.00	\$18,086.58
	F. Weather Beardsley Fund	\$499,176.04	\$19,959.81	\$0.00	\$19,959.81
	Mary Hawley Fund	\$79,251.92	\$3,168.93	\$0.00	\$3,168.93
	Mary Trubee Fund	\$1,316.86	\$52.66	\$0.00	\$52.66
	Jacob Klein Fund	\$20,087.19	\$803.20	\$0.00	\$803.20
	Warner Fund	\$6,610.65	\$264.33	\$0.00	\$264.33
	Woodruff Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Crosby Fund	\$49,908.62	\$1,995.62	\$0.00	\$1,995.62
	Lacy Fund	\$7,993.23	\$319.61	\$0.00	\$319.61
	Oliver Jennings Fund	\$56,502.33	\$4,890.48	\$0.00	\$4,890.48
	Soules Fund	\$56,965.71	\$2,277.80	\$0.00	\$2,277.80
	Carol Godfrey Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Marsh fund	\$28,272.42	\$1,130.49	\$0.00	\$1,130.49
	Edward Godfrey Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Sterling Free Bed Fund	\$421,022.84	\$16,834.81	\$0.00	\$16,834.81
	Blind Fund	\$49,946.72	\$1,997.14	\$0.00	\$1,997.14
	Anne Drew Miller Fund	\$813,491.53	\$62,134.55	\$0.00	\$62,134.55
	Loomis Fund	\$43,961.26	(\$195.40)	\$0.00	(\$195.40)
	Stiles Hall Fund	\$7,377.29	(\$13.04)	\$0.00	(\$13.04)
	Marietta Crowley Fund	\$133,794.72	\$5,349.85	\$0.00	\$5,349.85
	Caroline Betts Fund	\$11,822.25	\$472.72	\$0.00	\$472.72
	Alice Godfrey Fund	\$992.53	\$39.69	\$0.00	\$39.69
	Fable Fund	\$10,303.82	\$412.00	\$0.00	\$412.00
	Annie Jennings Fund	\$31,885.87	\$1,274.97	\$0.00	\$1,274.97
	Francis Leigh Fund	\$423.90	\$16.95	\$0.00	\$16.95
	Eliz. Lockwood Fund	\$13,323.43	\$532.74	\$0.00	\$532.74
	Francis Leigh Fund	\$36,840.69	\$1,473.09	\$0.00	\$1,473.09
	Susan Betts Fund	\$16,286.11	\$651.21	\$0.00	\$651.21
	Cole Fund	\$499,176.04	\$19,959.81	\$0.00	\$19,959.81
	Maria Lockwood Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Wood Fund	\$6,610.65	\$264.33	\$0.00	\$264.33
	Lane Fund	\$35,880.18	\$1,434.69	\$0.00	\$1,434.69
	Hunt Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Marquand Fund	\$325,136.70	\$16,363.73	\$0.00	\$16,363.73
	Pettingill Fund	\$34,586.99	\$1,532.98	\$0.00	\$1,532.98
	Pomeroy Fund	\$12,228.78	\$488.97	\$0.00	\$488.97

BRIDGEPORT HOSPITAL					
ANNUAL REPORTING					
FISCAL YEAR 2011					
REPORT 17 - HOSPITAL BED FUNDS HELD OR ADMINISTERED BY THE HOSPITAL					
B. BED FUND ACTIVITY					
(1)	(2)	(3)	(4)	(5)	(6)
Line	Name of Hospital Bed Fund	FMV of Principal	Actual Earnings	Earnings Reinvested	Earnings Available
	Frances Perry Fund	\$1,338.35	\$53.51	\$0.00	\$53.51
	Barnum Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Lewis Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Armstrong Fund	\$22,830.05	\$912.87	\$0.00	\$912.87
	Beach Fund	\$249,581.18	\$9,979.63	\$0.00	\$9,979.63
	Ives Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	DW Plumb Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	William Perry Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Mary Beardsley Fund	\$36,224.26	\$1,448.45	\$0.00	\$1,448.45
	Fray Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Gould Fund	\$27,696.94	\$1,107.48	\$0.00	\$1,107.48
	Couch Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Burnham Fund	\$341,200.31	\$13,643.07	\$0.00	\$13,643.07
	David Trubee Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Stephens Fund	\$9,627.31	\$384.95	\$0.00	\$384.95
	Stoddard Fund	\$7,993.23	\$319.61	\$0.00	\$319.61
	Bartram Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Thompson Fund	\$13,413.13	\$536.33	\$0.00	\$536.33
	Anna Jennings Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	O. G. Jennings Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Brothwell Fund	\$229,020.52	\$11,674.50	\$0.00	\$11,674.50
	Leavenworth/Sherman Fund	\$340,418.91	\$13,966.66	\$0.00	\$13,966.66
	Crane Value Fund	\$6,223.97	\$248.87	\$0.00	\$248.87
	Cowd Fund	\$220,284.89	\$15,413.60	\$0.00	\$15,413.60
	Wakeman Fund	\$237,756.22	\$16,186.30	\$0.00	\$16,186.30
	Rowland Fund	\$16,059.31	\$642.14	\$0.00	\$642.14
	Sarah Beardsley Fund	\$6,610.65	\$264.33	\$0.00	\$264.33
	Henry C. Knight Fund	\$6,610.65	\$264.33	\$0.00	\$264.33
	Margaret Mallet Fund	\$14,009.66	\$560.18	\$0.00	\$560.18
	Leavenworth Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Alice Setzer Fund	\$332,721.23	\$15,221.30	\$0.00	\$15,221.30
	Cook Fund	\$13,333.53	\$533.15	\$0.00	\$533.15
	Williams Fund	\$7,405.96	\$296.13	\$0.00	\$296.13
	Strong Fund	\$39,448.70	\$6,518.79	\$0.00	\$6,518.79
	Lyon Fund	\$6,661.16	\$266.35	\$0.00	\$266.35
	Abraham Klein Fund	\$7,699.09	\$307.85	\$0.00	\$307.85
	Richardson Fund	\$12,682.02	\$507.10	\$0.00	\$507.10
	Mary Godfrey Fund	\$15,848.06	\$633.69	\$0.00	\$633.69
	Charles Ferry Fund	\$1,033,879.45	\$85,252.42	\$0.00	\$85,252.42
	Mary Ferry Fund	\$2,448,560.33	\$190,104.56	\$0.00	\$190,104.56
	Nettleton Fund	\$16,307.85	\$652.08	\$0.00	\$652.08
	Rogers Fund	\$13,031.79	\$521.08	\$0.00	\$521.08
	Pflomm Fund	\$15,423.23	\$616.71	\$0.00	\$616.71
	Clarence Miller Fund	\$148,847.66	\$5,951.75	\$0.00	\$5,951.75
	Conlin Fund	\$9,105.64	\$364.09	\$0.00	\$364.09
	Atwater Fund	\$113,769.26	\$4,549.12	\$0.00	\$4,549.12
	Crissy Harral Fund	\$13,220.33	\$528.62	\$0.00	\$528.62
	Jacoby Fund	\$2,223.57	\$88.91	\$0.00	\$88.91
	Total Bed Funds :	\$12,163,317.25	\$724,058.07	\$0.00	\$724,058.07

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011**

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
I. GENERAL COLLECTION PROCESSES AND PROCEDURES		
A.	Hospital's processes and policies for assigning a debt to a Collection Agent	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
B.	Hospital's processes and policies for compensating a Collection Agent for services rendered	Each collection agent is reimbursed for services rendered based on separately negotiated performance related contracts.
C.	Total Recovery Rate on accounts assigned (excluding Medicare accounts) to Collection Agents	8.20%
II. SPECIFIC COLLECTION AGENT INFORMATION		
Collection Agent		
1	Collection Agent Name	Century Financial Services
2	Collection Agent Type	Collection Agency
3	Related / Not Related Entity	Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services rendered based on separately negotiated performance related contracts.

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011**

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	6.90%
	Collection Agent	
1	Collection Agent Name	Nair & Levin
2	Collection Agent Type	Attorney
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	7.60%
	Collection Agent	
1	Collection Agent Name	Tobin, Carberry, OMallery, Riley, Selinger, PC
2	Collection Agent Type	Attorney
3	Related / Not Related Entity	Not Related
4	If the Hospital follows the same processes and policies described in Section I, for assigning debt with this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	See Policies and Procedures associated with Credit and Collections files as part of Annual Reporting Section 19(a)-167g-91(b)(22).

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011**

REPORT 18 - HOSPITAL COLLECTION PLACEMENT POLICIES AND COLLECTION AGENT INFORMATION

(1)	(2)	(3)
LINE	DESCRIPTION	COLLECTION INFORMATION
5	If the Hospital follows the same processes and policies described in Section I, for compensating this Collection Agent? indicate "Same as General Processes and Policies" Otherwise Provide Details.	Each collection agent is reimbursed for services rendered based on separately negotiated performance related contracts.
6	Recovery Rate on Accounts Assigned (excluding Medicare accounts) to Collection Agent.	11.00%

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 19 - SALARIES AND FRINGE BENEFITS OF THE TEN HIGHEST PAID HOSPITAL POSITIONS**

LINE	POSITION TITLE	SALARY	FRINGE BENEFITS	TOTAL
1.	President & CEO	\$522,698	\$242,081	\$764,779
2.	Senior VP of Finance & CFO	\$489,002	\$179,997	\$668,999
3.	Medical Director	\$517,195	\$53,109	\$570,304
4.	Senior VP of Human Resources	\$361,186	\$107,055	\$468,241
5.	Senior VP & COO	\$382,574	\$75,427	\$458,001
6.	VP	\$317,717	\$134,894	\$452,611
7.	ER Physician	\$340,713	\$62,271	\$402,984
8.	Sr. VP of Quality Control & Risk Management	\$351,145	\$46,074	\$397,219
9.	ER Physician	\$331,534	\$60,218	\$391,752
10.	ER Physician	\$311,566	\$54,055	\$365,621
	Grand Total:	\$3,925,330	\$1,015,181	\$4,940,511

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 21- HOSPITAL SALARIES AND FRINGE BENEFITS
PAID BY JOINT VENTURES, AFFILIATES AND RELATED CORPORATIONS**

(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	SALARIES (Directly or Indirectly) ^C	FRINGE BENEFITS ^A (Directly or Indirectly) ^C	TOTAL
A . BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
B . BRIDGEPORT HOSPITAL FOUNDATION, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
C . BRIDGEPORT RENEWAL, LLC				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
D . CENTURY FINANCIAL SERVICES, INC. AND SUBSIDIARY (CENTURY)				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
E . SCHS PROPERTIES, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
F . SOUTHERN CONNECTICUT HEALTH NETWORK, INC.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
G . SOUTHERN CONNECTICUT PHYSICIANS, P.C.				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0
H . YALE NEW HAVEN HEALTH SERVICES CORPORATION, INC. (YNHSC)				
1	Paid by the Entity Listed Above to Hospital Employees(B)	\$0	\$0	\$0
2	Paid by the Hospital to Employees of the Entity Listed Above	\$0	\$0	\$0

For each entity listed on Report 20, complete Report 21.

A - Fringe benefits shall represent the value of all forms of compensation as described in Section 19a-643-206-(b)(21), including the fair market value where appropriate.

B - A hospital employee is anyone who provides a service which incurs an expense for the hospital.

C - Indirect payments include but are not limited to payments made to related entities.

**BRIDGEPORT HOSPITAL
ANNUAL REPORTING
FISCAL YEAR 2011
REPORT 22 - TRANSFER OF ASSETS OR OPERATIONS OR
CHANGE OF CONTROL FROM THE HOSPITAL TO A PROFIT ENTITY**

(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
A	Transfer of Assets or Operations	
1.	Name of the Person or Entity Organized or Operated For Profit involved in each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
2.	Description of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	N/A
3.	Description of each Hospital Clinical or Nonclinical Service or Function transferred or involved in a change of control.	N/A
4.	Date that each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions occurred.	N/A
5.	Amount of each Transfer of Assets or Operations or Change of Control involving Hospital Clinical or Nonclinical Services or Functions.	\$0

BRIDGEPORT HOSPITAL					
ANNUAL REPORTING					
FISCAL YEAR 2011					
REPORT 23 - CHARITY CARE AND REDUCED COST SERVICES PROVIDED BY THE HOSPITAL					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
LINE	DESCRIPTION	AMOUNT	AMOUNT	DIFFERENCE	DIFFERENCE
A. Hospital Charity Care (see Hospital Audited Financial Statement Notes)					
1.	Number of Applicants	1,806	1,817	11	1%
2.	Number of Approved Applicants	1,147	1,127	(20)	-2%
3.	Total Charges (A)	\$23,939,515	\$29,020,315	\$5,080,800	21%
	Average Charges	\$20,871	\$25,750	\$4,879	23%
4.	Ratio of Cost to Charges (RCC)	0.31569	0.293948	(0.021742)	-7%
	Total Cost	\$7,557,465	\$8,530,464	\$972,998	13%
	Average Cost	\$6,589	\$7,569	\$980	15%
5.	Charity Care - Inpatient Charges	\$1,169,477	\$1,402,004	\$232,527	20%
6.	Charity Care - Outpatient Emergency Department Charges	8,325,414	7,509,900	(815,514)	-10%
7.	Charity Care - Outpatient Charges (Excludes ED Charges)	14,444,624	20,108,411	5,663,787	39%
	Total Charges (A)	\$23,939,515	\$29,020,315	\$5,080,800	21%
8.	Charity Care - Number of Patient Days	2,532	2,064	(468)	-18%
9.	Charity Care - Number of Discharges	379	359	(20)	-5%
10.	Charity Care - Number of Outpatient ED Visits	1,413	1,748	335	24%
11.	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	4,732	5,324	592	13%
(A) The total amount must agree with the total amount listed in the Hospital Audited Financial Statement Notes.					
B. Hospital Bed Funds (see Hospital Reporting System - Report 17)					
1.	Number of Applicants	155	185	30	19%
2.	Number of Approved Applicants	155	185	30	19%
3.	Total Charges (B)	\$162,485	\$557,685	\$395,200	243%
	Average Charges	\$1,048	\$3,015	\$1,966	188%
4.	Ratio of Cost to Charges (RCC)	0.31569	0.293948	(0.021742)	-7%
	Total Cost	\$51,295	\$163,930	\$112,636	220%
	Average Cost	\$331	\$886	\$555	168%
5.	Bed Funds - Inpatient Charges	\$9,440	\$114,862	\$105,422	1117%
6.	Bed Funds - Outpatient Emergency Department Charges	39,549	142,367	102,818	260%
7.	Bed Funds - Outpatient Charges (Excludes ED Charges)	113,496	300,456	186,960	165%
	Total Charges (B)	\$162,485	\$557,685	\$395,200	243%
8.	Bed Funds - Number of Patient Days	340	339	(1)	0%
9.	Bed Funds - Number of Discharges	43	59	16	37%
10.	Bed Funds - Number of Outpatient ED Visits	123	287	164	133%
11.	Bed Funds - Number of Outpatient Visits (Excludes ED Visits)	545	874	329	60%
(B) The total amount must agree with the total amount listed on Hospital Reporting System - Report 17.					